

# BEST AVAILABLE COPY

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>DR</i>	<i>2273</i>	<i>7-9-00</i>
O.I.P.E. CLASSIFIER		<i>10</i>	<i>9/12</i>
FORMALITY REVIEW	<i>RS</i>	<i>01730</i>	<i>12-8-00</i>
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

Rejected N ..... Non-elected  
 Allowed I ..... Interference  
 (Through numeral) Canceled A ..... Appeal  
 Restricted O ..... Objected

Claim	Date
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If more than 150 claims or 10 actions  
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35 USC 101  
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